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SMALL ENTITY

25944

APPLN. TYPE

7590

01/11/2006

OLIFF & BERRIDGE, PLC P.O. BOX 19928 ALEXANDRIA, VA 22320



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CONFIDATEONING	LATTONIAN DOGUETANO	

TOTAL FEE(S) DUE

DATE DUE

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/706,009	11/13/2003	Motofumi Baba	117646	6535

PUBLICATION FEE

TITLE OF INVENTION: PEELING DEVICE AND FIXING DEVICE AND IMAGE FORMING APPARATUS USING THE PEELING DEVICE

ISSUE FEE

nonprovisional	NO	\$1400	,	3.	500	\$170	0 04/11/2006
EXAMIN	IER	ART UN	IT	CLASS-S	UBCLASS		
ROYER, WII	LLIAM J	2852		399-3	23000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				Oliff & Berridge, PLC
3. ASSIGNEE NAME AND R	ESIDENCE DATA TO B	E PRINTED ON T	THE PATEN	T (print or type)	)		
PLEASE NOTE: Unless as accordation as set forth in 3	n assignee is identified be 7 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app T a substitute	ear on the pate for filing an as	ent. If an assigne signment.	æ is identified	below, the document has been filed for
(A) NAME OF ASSIGNED Fuji Xerox Co		(В	•	CE: (CITY and Japan	STATE OR COU 94/12/29 91 FC:15	06 MBEYENES	88888145 18786889 1488.88 OP
Please check the appropriate a	ssignee category or catego	ries (will not be pr	inted on the p	patent): 🔲 Is	ndividual Co	04 rporation or oth	er private group entity Government
4a. The following fee(s) are en	closed:	46	. Payment of	Fee(s):		II 1	70707 (# 1700 M)
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Publication Fee (No small	all entity discount permitte	ed)			Form PTO-2038		
Advance Order - # of C	Copies		The Dir Deposit Acc	ector is hereby ount Number_	authorized by ch 15-0461	arge the require	ed fee(s), or credit any overpayment, to se an extra copy of this form).
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a. Applicant claims SM							us. See 37 CFR 1.27(g)(2).
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Authorized Signature	Elfton	26	me		Date 4	/11/0	76
Typed or printed name K				_		No. 42,73	
This collection of information	is required by 27 CEP 1.2	11 The information	n is required	to obtain or ret	ain a benefit by th	e nublic which	is to file (and by the LISPTO to process)

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